



# **State of New Hampshire Department of Health and Human Services**

REQUEST FOR INFORMATION #RFI-2021-OCOM-01-MEDIC

FOR

**Medicaid Program Integrity Data Analytics and Case Tracking  
System**

December 30, 2020



## REQUEST FOR INFORMATION

### 1. Overview and Purpose

#### 1.1. Overview

This Request for Information (RFI) is published to solicit information regarding data analytics services and products that analyze Medicaid claims data and assist in the detection of fraud, waste, and abuse.

#### 1.2. Purpose

The Department is in need of a data analytics system that can analyze claims data from the Medicaid system in order to identify possible trends, as well as specific instances of provider fraud, waste, and abuse. Additionally, the Department is seeking a case tracking system with the ability to effectively manage fraud, waste, and abuse case referrals and case status.

### 2. Background Information

- 2.1. Medicaid program integrity is required in accordance with 42 CFR Part 455, which mandates that Medicaid agencies have methods and criteria for identifying suspected fraud, as well as methods for investigating these cases that:
  - 2.1.1. Do not infringe on the legal rights of persons involved;
  - 2.1.2. Afford due process of law; and
  - 2.1.3. Refer suspected fraud cases to law enforcement officials using procedures developed in cooperation with State legal authorities.
- 2.2. The Department of Health and Human Services, Bureau of Improvement and Integrity, Program Integrity Unit is tasked with detecting fraud, waste, and abuse of the providers in the Medicaid program. The Unit must then recover these funds or refer the provider for prosecution, if the provider's behavior rises to the level of fraud.
- 2.3. In New Hampshire, the number of clients enrolled in Medicaid is approximately 187,000, of which:
  - 2.3.1. Approximately 131,000 clients are enrolled in standard Medicaid. Of those enrolled, approximately 15,000 are Children's Health Insurance Program (CHIP) clients.
  - 2.3.2. Approximately 56,000 clients are in the expansion population.
- 2.4. There are approximately 30,600 Medicaid providers enrolled in NH Medicaid. New Hampshire Medicaid services are provided by three (3) Managed Care organizations, with a limited number of services covered by the State Medicaid agency through a Fee-for-Service structure. In State Fiscal Year 2019, approximately \$654,159,957 in claims were processed by the Managed Care organizations, and approximately \$773,372,083 were processed by the State Medicaid agency for Fee-for-Service.



- 2.4.1. There are a number of services covered through the Managed Care companies, which include but are not limited to:
  - 2.4.1.1. In-patient hospital care and rehabilitation services.
  - 2.4.1.2. Physician services.
  - 2.4.1.3. Prescription drug services.
  - 2.4.1.4. Physical therapy.
  - 2.4.1.5. Skilled nursing Home Health Aide assisted physical therapy.
  - 2.4.1.6. Occupational therapy.
  - 2.4.1.7. Speech therapy.
  - 2.4.1.8. Private duty nursing care.
  - 2.4.1.9. Emergent and non-emergent medical transportation.
  - 2.4.1.10. Durable medical equipment.
  - 2.4.1.11. Psychotherapy.
  - 2.4.1.12. Podiatry Advanced Practice Registered Nurse (APRN) services.
  - 2.4.1.13. Midwife services.
  - 2.4.1.14. Early and Periodic Screening, Diagnostic, and Treatment (EPSDT).
  - 2.4.1.15. Laboratory and radiology services.
  - 2.4.1.16. Hospice care.
- 2.4.2. Additionally, there are carve-out services covered under the Fee-for-Service structure, which include but are not limited to:
  - 2.4.2.1. Medicaid to School medical services.
  - 2.4.2.2. Pediatric dentistry services.
  - 2.4.2.3. Home and Community-based care for the elderly.
  - 2.4.2.4. Home and Community-based care for developmental services.
  - 2.4.2.5. Acquired brain disorders.
  - 2.4.2.6. Children with special needs or disability waivers.
  - 2.4.2.7. Long-term nursing facility care.
- 2.4.3. Of the total number of clients enrolled for services, approximately 185,000 are enrolled in one of the three Managed Care agencies, and approximately 2,000 receive all Medicaid services through the Fee-for-Service system.



### 3. Objectives

#### 3.1. Preliminary Objectives

- 3.1.1. The Department's preliminary objectives are data analytics that will reduce Medicaid provider fraud, waste and abuse and a case management system to manage the caseload, including:
  - 3.1.1.1. **Developing a data analytics system that will analyze Medicaid claims data to assist in the detection of fraud, waste and abuse.** Identify best practices and available technology in the area of data analytics as it could aid in identifying Medicaid Provider fraud, waste, and abuse.
  - 3.1.1.2. **Developing a case management system to manage the caseload.** This should include, but not be limited to, communications, assignments, documentation status, and results of a referral once it is identified as a possible referral and possibly proceeds to an investigation and/or prosecution.

#### 3.2. RFI Objectives

##### 3.2.1. Primary Objectives

- 3.2.1.1. The primary objectives of this RFI are to solicit information regarding data analytics services and products, as well as information regarding a case tracking system, to identify possible approaches, solutions and systems that may assist the Department's Medicaid program integrity units in the elimination, investigation, and/or prosecution of fraud, waste, and abuse.

##### 3.2.2. Data Analytics

- 3.2.2.1. The Department envisions a Data Analytics System which will assist in the primary objectives as stated in Section 3.2.1.
- 3.2.2.2. The Department requires the Data Analytics System be secure, and the Vendor's security profile for the data structure allow for either an on premise solution or "Software as a Service". Additionally, it is desired that the System meet the security and compliance standards such as Health Information Trust Alliance (HITRUST) or Minimal Acceptable Risk Standards for Exchanges (MARS-E).
- 3.2.2.3. The Data Analytics System must be a secure environment with data hosting capabilities, such as on-site, hosted, web portal, Oracle, or cloud-based.
- 3.2.2.4. The Data Analytics System must employ methods such as algorithms, data analytics, and/or utilization analysis in fraud and abuse detection. The Department desires algorithms helpful in the detection of flags in Managed Care Organization data.



- 3.2.2.5. The Data Analytics System must be capable of running algorithms, building and executing statistical models using Medicaid data, and building models for analyzing data that include identifying a population and assessing whether a service was provided.
- 3.2.2.6. The Data Analytics System must be capable of integrating different types of data such as provider, member, claims, and encounter data.
- 3.2.2.7. The Department expects that analytics will be conducted using, at a minimum, Managed Care Contractor (MCC) encounter data, which is maintained by the Department.
- 3.2.2.8. The Department envisions a Data Analytics System with customizable interfaces, configurable to the Department's current data elements, and capable of being updated to meet the demands of System users.
- 3.2.2.9. The Data Analytics System should utilize industry standard approaches or scripts for data extraction that are capable of being customized in order to be applied to the Department's systems.
- 3.2.2.10. The Data Analytics System must be configurable or capable of using a common identifier to tie data together and detect patterns at the larger system level, as well as the individual provider level. For example, if one system identifies a provider by National Provider Identifier Standard (NPI), and another system identifies the provider by provider ID, the system should be capable of tying these identifiers together to identify certain patterns.
- 3.2.2.11. The Data Analytics System should offer reference tables for standard code sets, such as National Drug Codes (NDC), procedure and diagnostic codes, and have a structure capable of interacting with end reporting. The Department desires that the tables and table storage be well organized and potentially, also customizable.
- 3.2.2.12. The Data Analytics System should include a process for integrating historical case information from existing databases, known as a "look-back capability", with the ability to specify certain time periods.
- 3.2.2.13. The Data Analytics System should include reports that identify key performance indicators around recovery and return on investment.
- 3.2.2.14. The Data Analytics System must have reporting and dashboard capabilities which promote the identification of leads in fraud and abuse risks and ease of use.



- 3.2.2.15. The Department desires that the System be certified by the Centers for Medicare & Medicaid Services (CMS) as a Medicaid Management Information Systems (MMIS) module under MECP 2.3, in accordance with the Program Integrity Requirements checklist.
- 3.2.2.16. The Department desires the Vendor to be Federal Risk and Authorization Management Program (FedRAMP) certified.
- 3.2.2.17. The Department expects improvements or enhancements to the Data Analytics System be cost effective or incur no additional cost. The Department desires regular system maintenance or future enhancements to include the elimination of or change to algorithms deemed not useful to the Department.
- 3.2.2.18. The Department expects a workflow and approach to accompany the Data Analytics System in order to identify providers and/or other elements that enables effective detection of improper payments related to fraud and abuse.

### **3.2.3. Case Management**

- 3.2.3.1. The Department desires a Case Tracking System that will assist in the primary objectives as stated in Section 3.2.1.
- 3.2.3.2. The Case Tracking System should be capable of tracking case status and progress from case opening to case ending.
- 3.2.3.3. The Department envisions a Case Tracking System designed specifically for Medicaid fraud and abuse case tracking with a number of case management reporting capabilities.
- 3.2.3.4. The Case Tracking System should allow for users to enter notes for documentation purposes, including the ability to add attachments to cases such as letters, emails, and reports.
- 3.2.3.5. The Case Tracking System should include the capability for users to export specific information out of the system to provide to interested parties, such as Legal Counsel.
- 3.2.3.6. The Case Tracking System reporting component should be user-friendly and allow for ad-hoc reporting.

## **4. Factors to Consider**

### **4.1. Factors to consider include, but are not limited to:**

- 4.1.1. The Data Analytics System should be capable of using Managed Care encounter data.
- 4.1.2. The Data Analytics System would be required to use data from the MMIS system.
- 4.1.3. The Data Analytics System would be expected to function with



different interfaces which include, but are not limited to, eligibility, provider, member, claims and encounter data.

- 4.1.4. It is expected that projects and improvements are completed in a timely manner.
- 4.1.5. It is expected that support for the platforms and Systems be provided to the Department, if needed.

## 5. RFI Explanation and Questions

### 5.1. Notes to Respondents

- 5.1.1. The State is seeking a better understanding in the areas listed below, and requests interested Vendors to provide a response to the following questions, as applicable.
- 5.1.2. Respondents may respond to some or all of the questions below. Responses to all questions are encouraged, but not required. Responses can be brief or as lengthy as needed.
- 5.1.3. Respondents should ensure to label responses appropriately to the question being addressed.

### 5.2. RFI is not an RFP

- 5.2.1. This RFI is for informational purposes only, and is not intended to result in a contract or vendor agreement with any respondent. This RFI is not a Request for Proposals, Bids, or Applications. The State is seeking vendor community insight and information prior to finalizing business, functional, operational, and technical requirements before considering the publishing of a Request for Proposal (RFP).
- 5.2.2. This RFI does not commit the State to publish a RFP or award a contract. The issuance of an RFP, as a result of information gathered from these responses, is solely at the discretion of the State. Should an RFP be issued, it will be open to qualified vendors, whether those vendors choose to submit a response to this RFI. This RFI is not a pre-qualification process.

### 5.3. RFI Questions

#### 5.3.1. Vendor Organization/Experience

- Q1. *Briefly describe your organization, client base, financial stability, and history. Please keep generalized marketing material to a minimum.*
- Q2. *Describe your organization's experience in providing healthcare fraud detection within the last five (5) years. Include the following in your response:*
  - *Distinguish between Medicare and Medicaid experience.*
  - *Provide a total number of experiences where your healthcare fraud analytics system was utilized.*
  - *Of these experiences, how many were Medicaid experiences and how*





*many involved data analytics after the claim was paid?*

- *Confirm whether the solution envisioned for the Department has been used previously to conduct healthcare fraud analytics using MCC encounter data, as opposed to Fee-for-Service claims.*
- *Describe the data analytics support in the area of Medicaid provider fraud, waste, and abuse provided to other States.*

**Q3.** *Provide your experience with adherence to state standards. Additionally, provide your experience staffing a project of this size.*

**Q4.** *Describe whether your organization has the capability of providing solutions for both Data Analytics and Case Management.*

### **5.3.2. Data Analytics: Recommended Approaches**

**Q5.** *Provide a recommended approach for the provision of Data Analytics as it relates to identifying fraud, waste, and abuse in Medicaid providers. In doing so, describe the basic strategy and the specific tasks required to execute your recommended approach. Include the following in your response:*

- *Describe how this approach will improve the Department's programmatic goals including deciding what cases of fraud, waste, and abuse to pursue.*

**Q6.** *Provide an outline of what cost elements should be considered with your recommended approach. Include the following in your response:*

- *Describe the pricing structure, clearly identifying one-time and/or variable costs.*
- *Describe the pricing approach if additional customization or updates are required.*
- *Describe the typical price range for similar services.*

**Q7.** *Provide the functional capabilities that must be in place to ensure your approach is efficient and effective.*

**Q8.** *Provide an overview of the technology and service offerings that you currently provide which will help the Department meet the goals stated in Section 3.1.1.1., and the objectives stated in 3.2.2. Include the following in your response:*

- *Identify your data hosting capabilities, the platform used, and the level of security of the environment. Additionally, confirm whether the platform is FedRAMP certified.*
- *Identify the algorithms and statistical models offered, as well as how long it takes the engines to run the algorithms and how frequently they are run.*
- *Describe how your solution will extract data from an MMIS system or other data storage application.*
- *Identify how different types of data, such as provider, member, claims,*





*and encounter data, will be tied together.*

- *Identify what data sharing protocols are currently in use by your organization.*
- *Identify any scripts you are currently using that could be applied to the Department's systems, as well as your experience in developing custom scripts that may be necessary to extract data.*
- *Describe your data interfaces and the system's look-back capability.*
- *Identify how you will manage enhancements or change over time.*

**Q9.** *Describe the reporting and dashboarding capabilities of the proposed Data Analytics System that supports the User's efforts in identifying leads in fraud and abuse risks.*

**Q10.** *Explain what reports will be provided with the Data Analytics System that identify key performance indicators around recoveries and return on investment. Include the following in your response:*

- *Include what information is or has been provided to other clients that is relevant to measuring success.*

**Q11.** *Provide the staff training that would be required. Include the following in your response:*

- *Identify whether support or training will be required in order for the Department's staff to operate the Data Analytics System once implemented.*

**Q12.** *Provide the levels and frequency of support that should be provided, including an outline of the staffing ratios and types of staffing needed.*

**Q13.** *Explain the levels and frequency of the support that should be provided by the Department.*

### **5.3.3. Case Management: Recommended Approaches**

**Q14.** *Provide a recommended approach for the provision of a Case Management System as it relates to managing the process and tracking cases of waste, and abuse in Medicaid providers. In doing so, describe the basic strategy and the specific tasks required to execute your recommended approach.*

**Q15.** *Provide an outline of what cost elements should be considered with your recommended approach.*

- *Describe your pricing structure, clearly identifying one-time and/or variable costs.*
- *Describe the pricing approach if additional customization or updates are required.*
- *Describe the typical price range for similar services.*

**Q16.** *Provide the functional capabilities that must be in place to ensure your approach is efficient and effective.*



- Q17.** *Provide an overview of the technology and service offerings that you currently provide that will help the Department meet the goals stated in Section 3.1.1.2., and the objectives stated in 3.2.3. Include the following in your response:*
- *Identify whether your case tracking component is specifically created for Medicaid Fraud and Abuse Case Tracking or if the case tracking component is a Commercial-Off-The-Shelf (COTS) package.*
  - *Describe what reporting and tools Users will use to track case status and progress.*
- Q18.** *Describe the reporting capabilities of the Case Management System that will support the User's efforts in tracking fraud and abuse cases. Include the following in your response:*
- *Identify whether the solution allows for User to enter notes or add attachments for documentation purposes.*
- Q19.** *Provide the staff training that would be required. Include the following in your response:*
- *Identify whether support or training will be required in order for the Department's staff to operate the Case Management System once implemented*
- Q20.** *Provide the levels and frequency of support that should be provided, including an outline of the staffing ratios and types of staffing needed.*
- Q21.** *Explain the levels and frequency of the support that should be provided by the Department.*

#### **5.3.4. Areas of Concern**

- Q22.** *Every project has certain inherent risks. Describe the significant risk factors associated with your recommended approach and how they should be mitigated.*
- Q23.** *What other suggestions or recommendations do you have to ensure the services provided are successful?*
- Q24.** *Define any areas of concern that are related to the Factors to Consider in Section 4.*
- Q25.** *Are there additional questions or concerns that are important for the Department to consider with regard to developing and implementing a Data Analytics and Case Tracking System?*

## **6. Notices**

### **6.1. Sole Point of Contact**

The sole point of contact for this RFI relative to the submission of requested information, from the RFI issue date until the potential publication of an RFP, if ever, is:

State of New Hampshire



Department of Health and Human Services  
Jennifer Hackett Administrator I  
Contracts & Procurement  
Brown Building  
129 Pleasant Street  
Concord, NH 03301  
Email: Jennifer.hackett@dhhs.nh.gov  
Phone: (603) 271-9605

Other state personnel are NOT authorized to discuss this RFI before the submission deadline. The State will not be held responsible for oral responses to vendors regardless of source.

## 6.2. RFI Timetable

Request for Information Timetable		
Item	Action	Date
1.	Release RFI	12/30/20
4.	Vendor questions due	01/07/21
5.	Departments' answers to Vendor questions posted	01/14/21
6.	Information Submissions due	02/10/21

*All times are according to Eastern Time. The State reserves the right to modify these dates at its sole discretion.*

## 6.3. Vendor Questions and Answers

### 6.3.1. Vendor Questions

- 6.3.1.1. All questions about this RFI, including but not limited to requests for clarification, additional information or any changes to the RFI must be made in writing, citing the RFI page number and part or subpart, and submitted to the Procurement Coordinator identified in Subsection 6.1.
- 6.3.1.2. The Department may consolidate or paraphrase questions for efficiency and clarity. Questions that are not understood will not be answered. Statements that are not questions will not receive a response.
- 6.3.1.3. The Department will not acknowledge receipt of questions.
- 6.3.1.4. The questions may be submitted by e-mail; however, the Department assumes no liability for assuring accurate and complete e-mail transmissions.
- 6.3.1.5. Questions should be received by the deadline given in Subsection 6.2, RFI Timetable.

### 6.3.2. Department Answers

The Department intends to issue responses to properly submitted questions by the deadline specified in Subsection 6.2, RFI Timetable. Oral answers given are non-



binding. Written answers to questions submitted will be posted on online at (<http://www.dhhs.nh.gov/business/rfp/index.htm>). This date may be subject to change at DHHS' discretion.

#### **6.4. RFI Amendment**

The Department reserves the right to amend this RFI, as they deem appropriate prior to the submission deadline on their own initiative or in response to issues raised through vendor questions. In the event of an amendment to the RFI, the Department, at its sole discretion, may extend the submission deadline. The amended language will be posted on the Department Internet site.

#### **6.5. Information Submissions**

- 6.5.1. Information submitted in response to this RFI should be received no later than the time and date specified in Subsection 6.2. RFI responses must be addressed for delivery to the Sole Point of Contact listed in Subsection 6.1. **Responses must be marked with RFI #RFI-2021-OCOM-01-MEDIC.**

#### **6.6. Non-Collusion**

The Vendor's required signature on the Transmittal Cover Letter for a submission in response to this RFI, guarantees they have been established without collusion with other Vendors and without effort to preclude the Department from obtaining the best possible competitive proposal, should the Department publish an RFP.

#### **6.7. Collaborative Submissions**

Submissions must be made by one organization.

#### **6.8. Property of Department**

All material property submitted and received in response to this RFI will become the property of DHHS and will not be returned to the Vendor. The Department reserves the right to use any information presented in any submission provided that its use does not violate any copyrights or other provisions of law.

#### **6.9. RFI Response Withdrawal**

Prior to the Closing Date for receipt of submissions, a submission may be withdrawn by submitting a written request for its withdrawal to Sole Point of Contact identified in Section 6.1.

#### **6.10. Public Disclosure**

- 6.10.1. Any information submitted as part of a response to this RFI may be subject to public disclosure under RSA 91-A. In addition, in accordance with RSA 9-F:1, should an RFP be published by the Department, and a contract awarded, that information will be made accessible to the public online via the website Transparent New Hampshire ([www.nh.gov/transparentnh/](http://www.nh.gov/transparentnh/)). Accordingly, business financial information and proprietary information such as trade secrets, business and financials models and forecasts, and proprietary formulas are exempt from public disclosure under RSA 91-A:5, IV.



- 6.10.2. Insofar as a Vendor seeks to maintain the confidentiality of its confidential commercial, financial or personnel information, the Vendor must clearly identify in writing the information it claims to be confidential and explain the reasons such information should be considered confidential. This should be done by separate letter identifying by page number and RFI section number the specific information the Vendor claims to be exempt from public disclosure pursuant to RSA 91-A:5.
- 6.10.3. Each Vendor acknowledges that the Department is subject to the Right-to-Know Law New Hampshire RSA Chapter 91-A. The Department shall maintain the confidentiality of the identified confidential information insofar as it is consistent with applicable laws or regulations, including but not limited to New Hampshire RSA Chapter 91-A. In the event the Department receives a request for the information identified by a Vendor as confidential, the Department shall notify the Vendor and specify the date the Department intends to release the requested information. Any effort to prohibit or enjoin the release of the information shall be the Vendor's responsibility and at the Vendor's sole expense. If the Vendor fails to obtain a court order from a court of competent jurisdiction enjoining the disclosure, the Department may release the information on the date the Department specifies in their notice to the Vendor without incurring any liability to the Vendor.

#### **6.11. Non-Commitment**

The Department reserves the right to reject any and all RFI submissions or any portions thereof, at any time and to cancel this RFI and to solicit new or additional information under a new RFI process.

#### **6.12. Liability**

Vendors agree that in no event shall the State be either responsible for or held liable for any costs incurred by a Vendor in the preparation or submittal of or otherwise in connection with their submission.

#### **6.13. Request for Additional Information or Materials**

During the period from date of RFI Response submission to the date of RFP publication, if that should occur, the Department may request from any Vendor additional information or materials needed to clarify information presented as part of their submission. Such a request will be issued in writing.

#### **6.14. Oral Presentations and Discussions**

The Department reserves the right to request some or all Vendors to make oral presentations based upon their submission. Any and all costs associated with an oral presentation shall be borne entirely by the Vendor. Vendors may be requested to provide demonstrations of any proposed solutions. Such a request will be in writing.



## 6.15. Site Visits for the Department

The Department reserves the right to request a site visit for Department staff to review Vendor's organization structure, subcontractors, policy and procedures, and any other aspect of the RFI submission that directly affects the provisions of the RFI and the delivery of services. Any and all costs associated with the site visits incurred by the Vendor shall be borne by the Vendor.

## 7. RFI Response Submission Outline and Requirements

### 7.1. Presentation and Identification

#### 7.1.1. Overview

- 7.1.1.1. Respondents are asked to examine all documentation and other requirements.
- 7.1.1.2. The Department requests that submissions conform to all instructions, conditions and requirements included in the RFI.
- 7.1.1.3. Submissions should be received by the date and time specified in the RFI Timetable, Subsection 6.2. Submissions must be emailed to the Procurement Coordinator at the following email addresses:
  - 7.1.1.3.1. To: [DHHS-contracts@dhhs.nh.gov](mailto:DHHS-contracts@dhhs.nh.gov)
  - 7.1.1.3.2. Cc'd: [Jennifer.Hackett@dhhs.nh.gov](mailto:Jennifer.Hackett@dhhs.nh.gov)
- 7.1.1.4. The subject line must include the following information: RFI-2021-OCOM-01-MEDIC (email xx of xx).
- 7.1.1.5. The maximum size of file attachments per email is 10 MB. Proposals with file attachments exceeding 10 MB must be submitted via multiple emails.

### 7.2. Outline and Detail

- 7.2.1. **The Transmittal Cover Letter** – The Respondent shall submit a Transmittal Cover Letter in the following manner:
  - 7.2.1.1. On the Respondent's organization's letterhead;
  - 7.2.1.2. Identify the name, title, telephone number, and e-mail address of the person who will serve as the Respondent's representative for all matters relating to the RFI;
- 7.2.2. **Table of Contents** - The required elements of the Submission must be numbered sequentially and represented in the Table of Contents.